



COMMONWEALTH OF MASSACHUSETTS  
DIVISION OF STANDARDS  
ONE ASHBURTON PLACE, RM 1115  
BOSTON, MA 02108  
PHONE: 617-727-3480

OFFICE USE ONLY

ISSUE DATE: \_\_\_\_\_

ISSUED BY: \_\_\_\_\_

☐ NEW APPLICATION

☐ RENEWAL APPLICATION  
AUCTIONEER NUMBER

AU: \_\_\_\_\_

## Application for Auctioneer's License

In addition to this application, a surety bond in the amount of \$10,000.00 must be on file with the Division of Standards. The original bond must accompany this application in accordance with the requirements of Massachusetts General Law, Section 3 of Chapter 100.

PLEASE PRINT

NAME OF APPLICANT: \_\_\_\_\_

LEGAL RESIDENCE: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ FEDERAL ID NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

**IF APPLICANT IS A FIRM, PARTNERSHIP, ASSOCIATION OR CORPORATION THE FOLLOWING MUST BE COMPLETED:**

NAME OF BUSINESS ENTITY: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

**THE NAMES AND RESIDENCES OF OTHER PERSONS HAVING A DIRECT OR INDIRECT FINANCIAL INTEREST IN THE BUSINESS TO BE CONDUCTED BY ME UNDER THIS LICENSE ARE AS FOLLOWS:**

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

**HAVE YOU EVER BEEN CHARGED WITH, INDICTED FOR OR CONVICTED OF ANY FRAUDULENT OR ILLEGAL ACT IN ANY TRANSACTIONS OF ANY KIND? IF YES, GIVE DETAILS BELOW:**

**HAVE YOU EVER BEEN OR ARE YOU NOW A PARTY IN ANY PROCEEDINGS PENDING IN ANY COURT INVOLVING FRAUD, DECEIT OR MISREPRESENTATION? IF YES, PLEASE GIVE DETAILS BELOW.**

**LETTERS OF RECOMMENDATION (NOT NEEDED FOR RENEWALS)**

**LETTERS OF RECOMMENDATION MUST BE SIGNED BY TWO INDIVIDUALS WHO ARE EITHER: LICENSED AUCTIONEERS, ELECTED PUBLIC OFFICIALS, OR MEMBERS OF THE MASSACHUSETTS BAR. (not two of the same)**

WE, THE UNDERSIGNED, RECOMMEND THE APPLICANT NAMED HEREIN, \_\_\_\_\_, FOR LICENSURE AS AN AUCTIONEER IN THE COMMONWEALTH OF MASSACHUSETTS.

NAME	OFFICIAL DESIGNATION	PROVIDED LETTER
_____ <b>RENEWAL</b> _____	_____ <b>RENEWAL</b> _____	_____ <b>RENEWAL</b> _____
_____ <b>RENEWAL</b> _____	_____ <b>RENEWAL</b> _____	_____ <b>RENEWAL</b> _____

**PURSUANT TO MASSACHUSETTS GENERAL LAWS CHAPTER 100A, I CERTIFY UNDER PENALTIES OF PURJURY THAT I HAVE FILED ALL STATE TAX RETURNS AND PAID ALL TAXES REQUIRED UNDER LAW, THAT I HAVE COMPLIED WITH ALL LOCAL PERMIT AND LICENSE REQUIREMENTS, AND THAT ALL STATEMENTS CONTAINED IN THIS APPLICATION, TO THE BEST OF MY KNOWLEDGE AND BELIEF, ARE TRUE.**

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

IF APPLICANT IS A FIRM, PARTNERSHIP, ASSOCIATION OR CORPORATION:

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED OFFICER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME AND TITLE OF AUTHORIZED OFFICER